## MONTGOMERY COUNTY MEMORIAL HOSPITAL

INDEPENDENT AUDITOR'S REPORT FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

YEARS ENDED JUNE 30, 2013 AND 2012

## MONTGOMERY COUNTY MEMORIAL HOSPITAL

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# MONTGOMERY COUNTY MEMORIAL HOSPITAL Officials June 30, 2013

Board of Trustees:	Address	Term <u>Expires</u>
Jim Robinson, Chair	Villisca, Iowa	2016
Kenneth Rech, Vice-Chair	Red Oak, Iowa	2014
Lorin Petersen, Treasurer	Stanton, Iowa	2014
Roger Ehmke, Secretary	Red Oak, Iowa	2016
Kathy Carlson	Red Oak, Iowa	2018
Sarah Smith	Red Oak, Iowa	2014
Kevin Cabbage	Stanton, Iowa	2018
Chief Executive Officer: Allen E. Pohren	Red Oak, Iowa	
Chief Financial Officer:		
Rick Leinen	Red Oak, Iowa	

## Gronewold, Bell, Kyhnn & Co. P.C.

CERTIFIED PUBLIC ACCOUNTANTS • BUSINESS AND FINANCIAL CONSULTANTS

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MARK D. KYHNN DAVID L. HANNASCH KENNETH P. TEGELS CHRISTOPHER J. NELSON DAVID A. GINTHER

#### **INDEPENDENT AUDITOR'S REPORT**

To the Board of Trustees Montgomery County Memorial Hospital Red Oak, Iowa

#### Report on the Financial Statements

We have audited the accompanying statements of net position of Montgomery County Memorial Hospital as of June 30, 2013 and 2012 and the related statements of revenues, expenses and changes in net position, and cash flows for the years then ended, and related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatements, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in <u>Government Auditing Standards</u> issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Hospital's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control. Accordingly, we express no such opinion. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

To the Board of Trustees Montgomery County Memorial Hospital

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Opinion**

In our opinion the financial statements referred to above present fairly in all material respects, the financial position of Montgomery County Memorial Hospital as of June 30, 2013 and 2012 and the results of its operations, changes in financial position, and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

#### Report on Required Supplementary Information

Accounting principles generally accepted in the United States of America require Management's Discussion and Analysis and the Budgetary Comparison Information on pages 3 through 3e and on page 23 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board which considers it to be an essential part of the financial reporting for placing the basic financial statements in an appropriate operational, economic or historical context. We have applied certain limited procedures to the required supplementary information in accordance with U.S. generally accepted auditing standards, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the required supplementary information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

#### **Report on Supplementary Information**

Our audits were conducted for the purpose of forming an opinion on the financial statements that collectively comprise Montgomery County Memorial Hospital's basic financial statements. We previously audited, in accordance with the standards referred to in the second paragraph of this report, the financial statements for the three years ended June 30, 2011 (which are not presented herein) and expressed unqualified opinions on those financial statements. The supplementary information on pages 1 and 24 through 41 is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in our audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplementary information is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

To the Board of Trustees Montgomery County Memorial Hospital

#### Report on Other Legal and Regulatory Requirements

In accordance with <u>Government Auditing Standards</u>, we have also issued our report dated December 11, 2013 on our consideration of Montgomery County Memorial Hospital's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts, and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with <u>Government Auditing Standards</u> and important for assessing the results of our audit.

Smerson, Box, Kyhnn&Co, P.C.

Atlantic, Iowa December 11, 2013



# Montgomery County Memorial Hospital

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# MONTGOMERY COUNTY MEMORIAL HOSPITAL Management's Discussion and Analysis

Our discussion and analysis of Montgomery County Memorial Hospital's financial performance provides an overview of the Hospital's financial activity for the fiscal years ended June 30, 2013, 2012, and 2011. Please read it in conjunction with the Hospital's financial statements, which begin on page 4.

#### FINANCIAL HIGHLIGHTS

The Hospital's net position increased in 2013 by \$583,090, or 2.4 percent. The Hospital's net position increased in 2012 by \$827,121 or 3.5 percent.

The Hospital reported an operating loss of \$853,926 in 2013 and an operating loss of \$603,080 in 2012. In 2011, the Hospital reported an operating loss of \$1,822,607.

Non-operating revenues were \$1,406,016 in 2013, \$1,337,085 in 2012, and \$1,255,677 in 2011. The largest component of non operating revenues is county taxes, which have been approximately \$1.45 million each year (\$1.53 million in 2013).

#### USING THIS ANNUAL REPORT

The Hospital's financial statements consist of three statements - a Statement of Net Position; a Statement of Revenues, Expenses, and Changes in Net Position; and a Statement of Cash Flows. These financial statements and related notes provide information about the activities of the Hospital, including resources held by the Hospital but restricted for specific purposes by contributors, grantors, or enabling legislation.

THE STATEMENT OF NET POSITION AND STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION

Our analysis of the Hospital finances begins on page 3a. One of the most important questions asked about the Hospital's finances is, "Is the Hospital as a whole better or worse off as a result of the year's activities?" The Statement of Net Position and the Statement of Revenues, Expenses, and Changes in Net Position report information about the Hospital's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. All of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

These two statements report the Hospital's net position and changes in them. The Hospital's net position, the difference between assets and liabilities, is one way to measure the Hospital's financial health, or financial position. Over time, increases or decreases in the Hospital's net position are one indicator of whether its financial health is improving or deteriorating. Other non-financial factors, however, such as changes in the Hospital's patient base and measures of the quality of service it provides to the community, as well as local economic factors must be considered to assess the overall health of the Hospital.

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Management's Discussion and Analysis - Continued

#### THE STATEMENT OF CASH FLOWS

The final required statement is the Statement of Cash Flows. This statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. It explains what activities generated cash, how cash was used, and the change in the cash balance during the reporting period.

#### THE HOSPITAL'S NET POSITION

The Hospital's net position is the difference between its assets and liabilities reported in the Statement of Net Position on page 4. The Hospitals' net position increased \$583,090 or 2.4 percent in 2013 and increased \$827,121 or 3.5 percent in 2012, as you can see in Table 1.

Table 1: Assets, Liabilities, and Net Position	2013	2012	2011
Assets:     Current assets     Capital assets, net     Other noncurrent assets  Total assets	\$ 8,809,727	\$ 8,491,206	\$ 8,758,044
	19,985,689	21,455,529	21,924,713
	7,789,028	6,922,362	5,966,628
	\$ 36,584,444	\$ 36,869,097	\$ 36,649,385
Liabilities:    Long-term debt outstanding    Other current and noncurrent    liabilities  Total liabilities	\$ 7,170,476	\$ 7,632,880	\$ 8,174,106
	4,441,055	4,846,394	4,912,577
	\$ 11,611,531	\$ 12,479,274	\$ 13,086,683
Net Position: Invested in capital assets, net of related debt Restricted expendable assets Unrestricted  Total net position	\$ 12,352,809	\$ 12,687,661	\$ 12,302,941
	71,461	71,343	71,197
	12,548,643	11,630,819	11,188,564
	\$ 24,972,913	\$ 24,389,823	\$ 23,562,702
Total liabilities and net position	<u>\$ 36,584,444</u>	\$ 36,869,097	<u>\$ 36,649,385</u>

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Management's Discussion and Analysis - Continued

### OPERATING RESULTS AND CHANGES IN THE HOSPITAL'S NET POSITION

Table 2 shows the components of the operating and non operating activities and the resulting effect on changes in net position.

Table 2: Operating Results and Changes in Net Position

	2013	2012	2011
Operating Revenues:  Net patient service revenues Other operating revenues Total operating revenues	\$ 27,129,758 <u>392,062</u> 27,521,820	\$ 26,501,171 389,145 26,890,316	\$ 25,394,158 335,312 25,729,470
Operating Expenses: Salaries and wages Employee benefit Professional fees Other operating expenses Depreciation and amortization Total operating expenses	13,021,138 4,335,001 1,775,257 7,095,704 2,148,646 28,375,746	12,687,076 4,017,723 1,824,513 6,744,878 2,219,206 27,493,396	12,517,178 3,681,276 1,816,852 7,122,000 2,414,771 27,552,077
Operating loss  Non operating Revenues and Expenses: County taxes Investment income Noncapital grants and contributions Other non operating revenues (expenses), net Total non operating revenues, net	1,532,004 24,676 16,589 ( 167,253) 1,406,016	( 603,080) 1,458,468 23,365 25,403 ( 170,151) 1,337,085	1,366,800 31,948 19,870 ( 162,941) 1,255,677
Excess of Revenues Over Expenses (Expenses Over Revenues) Before Capital Grants and Contributions	552,090	743,005	( 566,930)
Capital Grants and Contributions	31,000	93,116	45,000
Increase (Decrease) in Net Position	583,090	827,121	( 521,930)
Net Position Beginning of Year	24,389,823 *	23,562,702 *	24,084,632 *
Net Position End of Year	\$ 24,972,913	\$ 24,389,823 *	\$ 23,562,702 *

<sup>\*</sup> Restated Note N

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Management's Discussion and Analysis – Continued

#### OPERATING INCOME AND LOSS

The first component of the overall change in the Hospital's net position is its operating income (loss) - generally, the difference between net patient service revenues and the expenses incurred to perform those services. In 2013, the Hospital had an operating loss of (\$853,926); in 2012, it was (\$603,080); and in 2011, the Hospital had an operating loss of (\$1,822,607). The operating loss in 2013 represents an increase of \$250,846 from the loss in 2012, and the operating loss in 2012 represents a decrease of \$1,219,527 from the loss in 2011.

#### The primary components of these operating income and operating losses are:

Net patient service revenue increased \$628,587 or 2.4 percent from 2012 to 2013. Components of this include \$817,334 in increased patient charges (1.9%), \$140,809 in increased contractual adjustments (1.0%), and increased \$16,493 provision for bad debts and charity care. Accounts written off were higher from 2013 to 2012. The aging of accounts receivable shows a trend of newer accounts on the Hospital's books. It should also be noted that part of the increase in patient charges and related contractual adjustments are due to the hospital assuming management of Red Oak Internal Medicine for the years in 2011, 2012, and 2013. In addition, Surgical Services were provided. Contractual adjustments include Medicare and Medicaid EHR incentive payments.

In 2013, contractual adjustments are 34.2 percent of patient service revenue, compared to 34.5 percent of patient service revenue in 2012, 34.2 percent in 2011, 31.8 percent in 2010, and 32.6 percent in 2009. Contractual adjustments have improved since 2004, 38.0 percent, because of the Hospital's designation as a Critical Access Hospital (CAH) effective October 1, 2004 by the Centers for Medicare and Medicaid Services. As a CAH, the Hospital is reimbursed defined costs for services provided to Medicare and Medicaid patients. Medicare patients represent about 57 percent of the Hospital's patient service revenue in 2013 (58 percent in 2012). Medicaid represents about 8.4 percent of the Hospital's patient service revenues in 2013 (8.0 percent in 2012).

Numerous factors affect the contractual adjustments, including changes in volume and patient mix, and the cost of labor, benefits, purchased services and supplies needed to provide patient services. The Hospital is reimbursed by Medicare and Medicaid at tentative rates until final settlement with the fiscal intermediaries. At the date of this report, two years of Medicare and two years of Medicaid cost reports have yet to be finalized.

In addition, the Hospital has payment contracts with commercial insurance carriers and preferred provider organizations that include discounts from established charges and prospectively determined rates as a basis of reimbursement. Many of the non-Medicare contractuals are increasing significantly. In particular, the Hospital's Wellmark business is at a discount of 20.8% for 2013 as compared to 19.0% for 2012. With new payment systems in place we expect Wellmark's contractual allowances to decrease in 2014.

Salaries and wages costs increased \$334,062 or 2.6 percent from 2012 to 2013. Employee benefits increased \$317,278 or 7.9 percent in 2013. The Hospital purchased an indemnity employee health insurance plan in calendar 2008 after 12 years of administering a self-insured plan.

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Management's Discussion and Analysis - Continued

Total operating expenses increased \$882,350 or 3.2 percent from 2012 to 2013. Included in this is a decrease in depreciation and amortization expense of \$70,560 or 3.2 percent. Depreciation includes the completion of the hospital's addition in August, 2010. Investments in new technology and replacement of aging capital assets in the past three years are resulting in decreased depreciation and equipment maintenance costs.

The Hospital sometimes provides care for patients who have little or no health insurance or other means of repayment. This service to the community is consistent with the goals established for the Hospital when it was established. Because there is no expectation of repayment, charity care is not reported as net patient service revenues of the Hospital.

#### NONOPERATING REVENUES AND EXPENSES

Non operating revenues consist primarily of property taxes levied by the Hospital and investment earnings. The property valuation is calculated as of July 1 each year and used as the basis for tax levies on January 1.

#### GRANTS, CONTRIBUTIONS, AND ENDOWMENTS

The Hospital receives contributions from the Montgomery County Memorial Hospital Foundation, the Montgomery County Memorial Hospital Auxiliary, and from individual donors. The Hospital receives both capital and operating grants from various state and federal agencies for specific programs. These are discussed in Note A.13 to the financial statements.

#### THE HOSPITAL'S CASH FLOWS

Changes in the Hospital's cash flows are consistent with changes in operating losses and non operating revenues and expenses, discussed earlier.

#### **BUDGETARY HIGHLIGHTS**

The official county budget of the Hospital for the year ended June 30, 2013 was prepared on a modified accrual basis. Hospital revenues and expenditures were less than budgeted amounts during 2013 by \$4,484,220 and \$5,200,481, respectively. The budgeted amounts were higher due to higher anticipated bad debts, salaries and benefits expenditures and lower actual patient volume.

#### CAPITAL ASSET AND DEBT ADMINISTRATION

#### Capital Assets:

At the end of 2013, the Hospital had \$19,694,373 invested in capital assets, net of accumulated depreciation (\$21,051,974 in 2012), as detailed in Note F to the financial statements. In 2013, the Hospital purchased new property and equipment costing \$868,449 (\$1,502,066 in 2012; \$1,036,204 in 2011). In 2012 the Hospital removed historical assets no longer in use or present amounting to \$3,679,943.

During the year ended June 30, 2011, the Hospital capitalized its long-term site development, renovation and expansion of the existing facility with a total cost of \$15,142,628.

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Management's Discussion and Analysis – Continued

#### Debt:

At year-end, the Hospital had \$7,632,880 in long-term debt outstanding as detailed in Note G (\$8,074,502 at June 30, 2012).

### CONTACTING THE HOSPITAL'S FINANCIAL MANAGEMENT

This financial report is designed to provide our patients, suppliers, taxpayers, and creditors with a general overview of the Hospital's finances and to show the Hospital's accountability for the money it receives. If you have questions about this report or need additional financial information, contact the Hospital Chief Financial Officer or Controller's Office at Montgomery County Memorial Hospital, Red Oak, Iowa.

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Statements of Net Position June 30,

## **ASSETS**

	2013		2012	
Current Assets:				
Cash	\$	677,678	\$	1,657,621
Patient receivables, less allowances for doubtful accounts and contractual adjustments (\$2,202,000	Ψ	ŕ	Ψ	1,037,021
in 2013, \$1,519,000 in 2012)		4,817,817		4,644,340
Other receivables		67,198		62,379
Inventory		380,900		396,487
Prepaid expense		299,933		168,973
Estimated third party payor settlements		953,000		
Succeeding year property tax receivable		1,525,000		1,469,000
Internally designated assets  Total current assets		88,201	_	92,406
Total current assets		8,809,727		8,491,206
Designated and Restricted Assets:				
Internally designated assets		7,265,661		6,424,608
Restricted assets		71,461		71,343
T		7,337,122		6,495,951
Less amounts required to meet current liabilities		88,201		92,406
		7,248,921		6,403,545
Capital Assets:				
Depreciable capital assets, net		19,694,373		21,051,974
Non-depreciable capital assets		291,316		403,555
		19,985,689		21,455,529
Other Assets:				
Notes receivable		32,750		25,000
Other		<u>507,357</u>		493,817
	-	540,107		518,817
Total assets	<u>\$</u>	36,584,444	<u>\$</u>	36,869,097

## LIABILITIES AND NET POSITION

	2013		2012	
Current Liabilities:				
Current maturities of long-term debt	\$	462,404	\$	434,609
Accounts payable	Ψ	756,426	Ψ	1,167,688
Accrued salaries and wages		514,049		453,974
Accrued other employee compensation		829,779		820,511
Accrued interest payable		28,048		29,671
Accrued fees		21,219		19,219
Payroll taxes withheld and accrued		255,695		226,557
Other current liabilities		48,435		18,165
Estimated third-party payor settlements				207,000
Deferred revenue for succeeding year property				
tax receivable		<u>1,525,000</u>		1,469,000
Total current liabilities		4,441,055		4,846,394
Long-Term Debt: Notes payable, less unamortized refunding costs and current maturities		7,170,476		7,632,880
Total liabilities		11,611,531		12,479,274
Net Position:				
Invested in capital assets, net of related debt		12,352,809		12,687,661
Restricted - expendable		71,461		71,343
Unrestricted		12,548,643		11,630,819
Total net position		24,972,913		24,389,823
Total liabilities and net position	<u>\$</u>	36,584,444	<u>\$</u>	36,869,097

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Statements of Revenues, Expenses and Changes in Net Position Year ended June 30,

	2013	2012
Revenue:		
Net patient service revenue	\$ 27,129,758	\$ 26,501,171
Other revenue	392,062	389,145
Total revenue	27,521,820	26,890,316
Expenses:		
Nursing service Other professional service General service Fiscal and administrative service Provision for depreciation Total expenses	7,208,712 12,035,677 2,708,291 4,274,420 2,148,646 28,375,746	6,839,283 11,841,591 2,581,464 4,011,852 2,219,206 27,493,396
Operating Loss	( 853,926)	( 603,080)
Non-Operating Revenue (Expenses): County taxes Investment income Noncapital grants and contributions Rental income, net Interest expense Non-operating revenue, net	1,532,004 24,676 16,589 203,997 ( 371,250) 1,406,016	1,458,468 23,365 25,403 226,676 ( 396,827) 1,337,085
Excess of Revenues Over Before Capital Grants and Contributions	552,090	734,005
Capital Grants and Contributions	31,000	93,116
Increase in Net Position	583,090	827,121
Net Position - Beginning of Year, as restated (Note N)	24,389,823	23,562,702
Net Position - End of Year, as restated	\$ 24,972,913	\$ 24,389,823

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Statements of Cash Flows Year ended June 30,

	2013	2012
Cash flows from operating activities:  Cash received from patients and third-party payors  Cash paid to suppliers  Cash paid to employees  Other revenue received  Net cash provided by operating activities	\$ 25,791,462 ( 12,957,378) ( 12,951,795) <u>392,062</u> 274,351	\$ 26,537,133 ( 12,457,428) ( 12,566,015) <u>389,145</u> 1,902,835
Cash flows from non-capital financing activities: County tax received Noncapital grants and contributions Net cash provided by non-capital financing activities	1,532,004 16,589 1,548,593	1,458,468 25,403 1,483,871
Cash flows from capital and related financing activities:  Construction in progress expenditures Purchase of property and equipment Principal paid on long-term debt Principal paid on capital leases Interest paid Capital grants and contributions Net cash used in capital and related financing activities	( 625,259) ( 824,317) ( 441,622)  ( 365,860) 31,000 ( 2,226,058)	( 774,311) ( 1,296,919) ( 421,774) ( 138,181) ( 400,849) <u> 93,116</u> ( 2,938,918)
Cash flows from investing activities: Investment income received Increase in designated and restricted assets Increase in notes receivable, net Office building rental income Increase in other assets Net cash provided by investing activities	24,676 ( 7,213) ( 15,000) 280,601 ( 25,935) 257,129	23,365 ( 7,106) ( 25,000) 279,125 ( 38,638) 231,746
Net increase (decrease) in cash and cash equivalents	( 145,985)	679,534
Cash and cash equivalents at beginning of year	6,287,298	5,607,764
Cash and cash equivalents at end of year	<u>\$ 6,141,313</u>	\$ 6,287,298

(continued next page)

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Statements of Cash Flows - Continued Year ended June 30,

	<del></del>	2013		2012
Reconciliation of cash and cash equivalents to the statements of net position:				
Cash in current assets Cash and cash equivalents in internally	\$	677,678	\$	1,657,621
designated assets		5,463,635		4,629,677
	<u>\$</u>	6,141,313	<u>\$</u>	6,287,298
Reconciliation of operating loss to net cash				
provided by operating activities:				
Operating loss	\$(	853,926)	\$(	630,987)
Adjustments to reconcile operating loss	`	, ,		,,
to net cash provided by operating activities				
Provision for depreciation		2,148,646		2,219,206
Amortization		19,645		55,303
Changes in assets and liabilities		- ,		,
Accounts receivable	(	178,296)	(	1,109,038)
Inventory		15,587	`	17,107
Prepaid expense	(	130,960)		261,917
Estimated third-party payor settlements	(	1,160,000)		1,145,000
Accounts payable, trade		282,904	(	209,022)
Accrued salaries and wages		60,075	(	85,805
Accrued other employee compensation		9,268		35,256
Payroll taxes withheld and accrued		29,138		47,416
Accrued fees		2,000		1,500
Other current liabilities		30,270	(	16,628)
Total adjustments		1,128,277		2,533,822
Net cash provided by operating activities	<u>\$</u>	274,351	<u>\$</u>	1,902,835

# NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### 1. Reporting Entity

Montgomery County Memorial Hospital (the Hospital) is a critical access county hospital that provides acute care with related ancillary, outpatient, home health, hospice and physician clinic services. The Hospital is organized under Chapter 347 of the Code of Iowa, accordingly is a political subdivision of the State of Iowa, and is therefore exempt from federal and state income taxes. It is governed by a seven member board of trustees elected for six year terms. The Hospital has considered all potential component units for which it is financially accountable, and other organizations for which the nature and significance of their relationship with the Hospital are such that exclusion would cause the Hospital's financial statements to be misleading or incomplete. The criteria for determining financial accountability include: appointing a majority of an organization's governing body, and (a) the Hospital's ability to impose its will on that organization, or (b) the potential for the organization to provide benefits to or impose financial burdens on the Hospital.

The Hospital has one component unit. The Montgomery County Memorial Hospital Foundation is a component unit because the Hospital is the sole beneficiary of the Foundation. It has limited assets and activity other than collecting contributions to be disbursed to the Hospital. Therefore, combining the component unit would not have a material effect on these financial statements.

The following summary shows the net increase or (decrease) blending the component would have on the assets, net position, and revenues of Montgomery County Memorial Hospital as of and for the year ended June 30:

	2013	2012
Assets would increase by	<u>\$ 216,369</u>	<u>\$ 188,606</u>
Net Position would increase by	<u>\$ 216,369</u>	<u>\$ 188,606</u>
Revenues would increase (decrease) by	<u>\$ 27,763</u>	<u>\$(</u> 9,390)

#### 2. Enterprise Fund Accounting

The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus.

### MONTGOMERY COUNTY MEMORIAL HOSPITAL Notes to Financial Statements

June 30, 2013 and 2012

#### NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING **POLICIES - Continued**

#### 3. Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### 4. Cash and Cash Equivalents

Cash and cash equivalents include investments in highly liquid debt instruments with a maturity of three months or less, including designated and restricted assets.

#### 5. Inventory Valuation

Inventory is valued at the lower of cost (first-in, first-out method) or market.

#### 6. Investments

Investments are reported at fair value except for short-term highly liquid investments that have a remaining maturity at the time they are purchased of one year or less. These investments are carried at amortized cost. Interest, dividends, and gains and losses, both realized and unrealized, on investments are included in non-operating revenue when earned. unless restricted by donor or law.

#### 7. Capital Assets

The Hospital's capital assets are reported at historical cost. Contributed capital assets are reported at their estimated fair value at the time of their donation. Capital assets with lives in excess of two years and cost in excess of \$5,000 are capitalized. These capital assets, other than land, are depreciated or amortized (in the case of capital leases) using the straight-line method of depreciation using their estimated useful lives (fifteen to fifty years for buildings and land improvements and three to twenty years for equipment).

#### 8. Costs of Borrowing

Except for capital assets acquired through gifts, contributions, or capital grants, interest cost on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets. The Hospital capitalized interest cost of \$ - 0 - in 2013 (\$25,000 in 2012).

# NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### 9. Compensated Absences

Hospital employees earn paid time off at varying rates depending on years of service. Paid time off consists of holiday, vacation and sick time and accumulates to a maximum of 528 hours. Paid time off hours cannot be earned or saved beyond twice the annual amount earned. The computed amount of paid time off benefits earned by year end is recorded as part of accrued other employee compensation.

#### 10. Operating Revenues and Expenses

The Hospital's statement of revenues, expenses and changes in net position distinguishes between operating and non-operating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services - the Hospital's principal activity. Nonexchange revenues, including taxes, grants, and contributions received for purposes other than capital asset acquisition, are reported as non-operating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

#### 11. Net Patient Service Revenue

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

#### 12. Property Tax Levy

Property tax receivable is recognized on the levy or lien date, which is the date that the tax asking is certified by the County Board of Supervisors. The succeeding year property tax receivable represents taxes certified by the Board of Supervisors to be collected in the next fiscal year for the purposes set out in the budget for that year. Although the succeeding year property tax receivable has been recorded, the related revenue is deferred and will not be recognized as revenue until the year for which it is levied. Property tax revenue is reported as non-operating revenue when collected by the County Treasurer.

#### 13. Grants and Contributions

Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements, including time requirements are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as non-operating revenues. Amounts restricted to capital acquisitions are reported after non-operating revenues and expenses.

# NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### 14. Endowments

Endowments are provided to the Hospital on a voluntary basis by individuals and private organizations. *Permanent* endowments require that the principal or corpus of the endowment be retained in perpetuity. If a donor has not provided specific instructions, law permits the Board of Trustees to authorize for expenditure the net appreciation of the investments of endowment funds. Currently, the Hospital has no endowment funds.

#### 15. Restricted Resources

Use of restricted or unrestricted resources for individual projects is determined by the Hospital Board of Trustees based on the facts regarding each specific situation.

#### 16. Net Position

Net position of the Hospital is classified in three components. *Invested in capital assets net of related debt* consists of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets. *Restricted net position* consists of noncapital assets that must be used for a particular purpose or permanent endowments, as specified by creditors, grantors, or contributors external to the Hospital. *Unrestricted net position* consists of the remaining net position that does not meet the definition of *invested in capital assets net of related debt or restricted*.

#### 17. Charity Care

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Revenue from services to these patients is automatically recorded in the accounting system at the established rates, but the Hospital does not pursue collection of the amounts. The resulting adjustments are recorded as bad debts or charity service depending on the timing of the charity determination.

#### 18. Accounting Changes

In June, 2011, the Governmental Accounting Standards Board (GASB) issued Statement No. 63, "Financial Reporting of Deferred Outflows of Resources, Deferred Inflows of Resources, and Net Position." This statement provides financial reporting guidance for deferred outflows of resources and deferred inflows of resources. Previous financial reporting standards did not include guidance for these elements, which are distinct from assets and liabilities. This statement is effective for the Hospital for 2012-2013.

The GASB has issued GASB Statement No. 65 "Items Previously Reported as Assets and Liabilities" and GASB Statement No. 66 "Technical Corrections - 2012." No. 65 specifies proper accounting treatment for certain items and helps clarify the items that should be included under the categories established under Statement No. 63. No. 66 resolves conflicting guidance that resulted from previously issued Statements No. 54 and No. 62. The Hospital has elected to early implement these Statements, which are required to be implemented in the 2013-2014 year. See Note N for effects of accounting change.

#### NOTE B - THIRD-PARTY PAYOR ARRANGEMENTS

A summary of the payment arrangements with major third-party payors follows:

Medicare and Medicaid - Inpatient services and most outpatient services related to program beneficiaries are paid based on a cost reimbursement methodology. The Hospital is reimbursed for the cost of services at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the fiscal intermediaries. The Hospital's Medicare and Medicaid cost reports have been audited and finalized by the fiscal intermediaries through June 30, 2011. However, finalized cost reports are subject to re-opening by the intermediaries within three years of the date of finalization. Outpatient services not paid based on a cost reimbursement methodology are paid based on a prospectively determined fee schedule.

The Hospital also has entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Hospital under these agreements includes prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates.

#### NOTE C - ENDOWMENTS AND RESTRICTED ASSETS

Restricted expendable assets are available for the following purposes:

	2013	2012
Long-term debt	<u>\$ 71,461</u>	\$ 71,343
The Hospital has no restricted nonexpendable assets or en-	dowments at June	30, 2013 or 2012.
Following is a summary of the use of temporarily restricte 30:	d assets during the	year ended June
	2013	2012
Purchase of property and equipment	\$ 31,000	\$ 93,116

#### **NOTE D - DESIGNATED ASSETS**

Designated assets remain under the control of the Board of Trustees, which may, at its discretion, later use the funds for other purposes. Of the \$12,548,643 (\$11,630,819 as of June 30, 2012) of unrestricted net position as of June 30, 2013, \$7,265,661 (\$6,424,608 for 2012) has been designated by the Hospital's Board of Trustees for purposes identified in the following schedule.

		2013		2012
Capital acquisitions and related property taxes Operations	\$	16,740 7,248,921	\$	21,063 6,403,545
	<u>\$</u>	7,265,661	<u>\$</u>	6,424,608

#### NOTE E - DEPOSITS AND INVESTMENTS

The Hospital's deposits at June 30, 2013 were entirely covered by federal depository insurance or the State Sinking Fund in accordance with Chapter 12C of the Code of Iowa. This chapter provides for additional assessments against the depositories to ensure there will be no loss of public funds. The investments are all insured, registered, or held by the Hospital or its agent in the Hospital's name. Investments are stated as indicated in Note A.

The Hospital is authorized by statute to invest public funds in obligations of the United States Government, its agencies and instrumentalities; certificates of deposit or other evidences of deposit at federally insured depository institutions approved by the Board of Trustees; prime eligible bankers acceptances; certain high rated commercial paper; perfected repurchase agreements; certain registered open-end management investment companies; certain joint investment trusts; and warrants or improvement certificates of a drainage district.

The composition of designated and restricted assets is as follows:

	2013	2012
Internally Designated Assets: Cash and cash equivalents Certificates of deposit Interest receivable	\$ 5,392,174 1,870,112 3,375	\$ 4,558,334 1,863,369 2,905
	<u>\$ 7,265,661</u>	\$ 6,424,608
Restricted Assets: Cash and cash equivalents	<u>\$ 71,461</u>	<u>\$ 71,343</u>

Interest Rate Risk. The Hospital's investment policy limits the investment of operating funds (funds expected to be expended in the current budget year or within 15 months of receipt) in instruments that mature within 397 days. Funds not identified as operating funds may be invested in investments with maturities longer than 397 days but the maturities shall be consistent with the needs and use of the Hospital.

### NOTE F - CAPITAL ASSETS

Capital assets, additions, disposals and balances for the years ended June 30, 2013 and 2012 were as follows:

Cost		Balance 2012		Additions	_I	Disposals		Balance 2013
Land Improvements Buildings Building Components Building Service Equipment Fixed Equipment Major Movable Equipment	<b>\$</b>	2,024,771 15,104,662 2,034,693 11,079,853 1,233,496 12,143,372 43,620,847	\$	  119,959  748,490 868,449	\$	    	\$	2,024,771 15,104,662 2,034,693 11,199,812 1,233,496 12,891,862 44,489,296
<u>Depreciation</u>								
Land Improvements Buildings Building Components Building Service Equipment Fixed Equipment Major Movable Equipment		1,181,526 4,329,538 1,793,033 5,383,274 628,423 9,253,079		111,382 711,373  404,330 45,520 953,445		    	-	1,292,908 5,040,911 1,793,033 5,787,604 673,943 10,206,524
Total Depreciation		22,568,873		2,226,050				24,794,923
Depreciable Capital Assets, Net	<u>\$_</u>	21,051,974	<u>\$(</u>	1,357,601)	<u>\$</u>		\$	19,694,373
Construction in Progress Land	\$	300,215 103,340	\$	376,228	\$	488,467	\$	187,976 103,340
Non-Depreciable Capital Assets	<u>\$</u>	403,555	<u>\$</u>	376,228	<u>\$</u>	488,467	<u>\$</u>	291,316

#### NOTE F - CAPITAL ASSETS - Continued

Cost		Balance 2011		Additions		Disposals		Balance 2012
Land Improvements Buildings Building Components Building Service Equipment Fixed Equipment Major Movable Equipment	<b>\$</b>	1,997,439 14,985,870 2,034,693 11,009,428 1,227,378 14,543,916 45,798,724	\$	27,332 118,792  70,425 6,118 1,279,399 1,502,066	<b>\$</b>	3,679,943 3,679,943	\$	2,024,771 15,104,662 2,034,693 11,079,853 1,233,496 12,143,372 43,620,847
<u>Depreciation</u>								
Land Improvements Buildings Building Components Building Service Equipment Fixed Equipment Major Movable Equipment		1,068,776 3,697,975 1,707,622 4,974,591 618,768 11,909,619		112,750 631,563 85,411 408,683 9,655 1,023,403		    3,679,943		1,181,526 4,329,538 1,793,033 5,383,274 628,423 9,253,079
Total Depreciation		23,977,351		2,271,465		3,679,943	_	22,568,873
Depreciable Capital Assets, Net	<u>\$</u>	21,821,373	<u>\$(</u>	<u>769,399</u> )	<u>\$</u>	***	<u>\$</u>	21,051,974
Construction in Progress Land	\$	103,340	\$	300,215	\$ _	 	\$	300,215 103,340
Non-Depreciable Capital Assets	<u>\$_</u>	103,340	<u>\$</u>	300,215	<u>\$</u>		<u>\$_</u>	403,555

The property and equipment includes a medical office building attached to the Hospital and related equipment totaling \$3,303,676, of which a portion is rented to local healthcare related organizations. The depreciation expense on all property and equipment totaled \$2,226,050 for the year ended June 30, 2013 (\$2,271,465 in 2012), of which \$77,404 (\$52,259 in 2012) is related to the rental space and is included in the net rental income under non-operating revenue.

#### NOTE G - NON-CURRENT LIABILITIES

A schedule of changes in the Hospital's non-current liabilities for the years ended June 30, 2013 and 2012 follows:

	Balance 2012	Additions	Reductions	Balance2013	Current Portion
Long-Term Debt: Series 2009 note Less unamortized	\$ 8,074,502		\$ 441,622	\$ 7,632,880	\$ 462,404
refunding costs	( 7,013)		( 7,013)		
Total Long-Term Debt	<u>\$ 8,067,489</u>	\$	<u>\$ 434,609</u>	<u>\$ 7,632,880</u>	<u>\$ 462,404</u>
	Balance 2011	Additions	Reductions	Balance 2012	Current Portion
Long-Term Debt: Series 2009 note Less unamortized	\$ 8,496,276	\$	\$ 421,774	\$ 8,074,502	\$ 441,622
refunding costs Capital Lease Obligation	( 29,827) 138,181		( 22,814) 138,181	( 7,013)	( 7,013)
Total Long-Term Debt	<u>\$ 8,604,630</u>	<u> </u>	<u>\$ 537,141</u>	\$ 8,067,489	<u>\$ 434,609</u>

The Series 2009 Revenue and Refunding Capital Loan Note was issued in September, 2009 in a principal amount up to \$8,700,000. The note was issued to refund the Series 2003 notes and pay for a renovation and expansion project. The note carries an interest rate of 4.625% per annum through December 1, 2015. On December 1, 2015 and again on December 1, 2020, the rate will be adjusted to 1.375% over the five year Federal Home Loan Bank of Des Moines fixed advance rate in effect on those dates. Such rate increases, however, will be limited to a 1.75% increase over the preceding effective interest rate. Commencing December 1, 2010, the note matures in 60 equal quarterly installments (as adjusted for changes in the interest rate) of principal and interest.

#### NOTE G - NON-CURRENT LIABILITIES - Continued

The note is collateralized by future revenues of the Hospital. Under the terms of the note indenture, the Hospital is required to satisfy certain measures of financial performance as long as the note is outstanding. The note indenture also places limits on the incurrence of additional borrowings. The Hospital is also required to maintain certain deposits with a bank. Such deposits are included with restricted assets in the financial statements.

The annual debt service on the notes and capital lease obligation is expected to require less than 26% of cash flow available for debt service. For the current year, debt service and cash flow for debt were approximately \$807,500 and \$3,180,400, respectively.

Scheduled principal and interest repayments on the long-term debt are as follows:

Year Ending		Long-Term Debt							
<u>June 30,</u>	Principal	Interest	Total						
2014 2015 2016 2017 2018	\$ 462,404 484,164 506,948 530,804 555,783	\$ 345,078 323,318 300,534 276,678 251,699	\$ 807,482 807,482 807,482 807,482 807,482						
2019-2023 2024-2026	3,196,728 1,896,049 \$ 7,632,880	\$40,680 122,654 \$ 2,460,641	4,037,408 2,018,703 \$ 10,093,521						

Total interest cost for the year ended June 30, 2013 was \$371,250 (\$421,827 in 2012). Interest of \$ - 0 - (\$25,000 in 2012) was capitalized as part of the cost of construction in progress.

#### NOTE H - PENSION AND RETIREMENT BENEFITS

The Hospital contributes to the Iowa Public Employees Retirement System (IPERS) which is a cost-sharing multiple-employer defined benefit pension plan administered by the State of Iowa. IPERS provides retirement and death benefits which are established by State statute to plan members and beneficiaries. IPERS issues a publicly available financial report that includes financial statements and required supplementary information. The report may be obtained by writing to IPERS, P.O. Box 9117, Des Moines, Iowa 50306-9117.

Plan members are required to contribute 5.78% (5.95% beginning July 1, 2013) of their annual salary and the Hospital is required to contribute 8.67% (8.93% beginning July 1, 2013) of annual covered payroll. Contribution requirements are established by State statute. The Hospital's contributions to IPERS for the years ended June 30, 2013, 2012, and 2011, were approximately \$1,111,000, \$1,006,000, and \$851,000, respectively, equal to the required contributions for each year.

#### NOTE I - DEFERRED COMPENSATION PLAN

The Hospital sponsors a deferred compensation plan which is administered by an independent contractor under Internal Revenue Code Section 457. The plan permits employees to defer a portion of their salary until future years. The Hospital's human resource and payroll departments are responsible for the accounting, reconciliations and recordkeeping associated with employees' enrollment, payments to the plan through payroll deductions and timely transfer of withheld funds to the trustee designated by the participant for investment. The plan is designed so that each participant retains investment control of his/her individual account. The deferred compensation is not available to employees until termination, retirement, death, or unforeseeable emergency.

The Hospital's fiduciary responsibility is limited to due care in selecting the plan administrator. The administrator is responsible for withholdings and W-2s when the participants receive payments. The administrator is also required to submit an annual report to the Hospital. The Hospital is liable to a participant only for income lost because of its failure to send payment of a deferred amount as directed by the participant.

The market value of the exclusive benefit plan assets at June 30, 2013, was approximately \$2,715,400, (\$2,414,578 at June 30, 2012). This amount is not included in the financial statements since the Hospital does not own or hold in a trustee capacity the amounts deferred by employees and related income on those amounts.

#### NOTE J - RELATED ORGANIZATIONS

Health Partners of Southwest Iowa

The Hospital has joined with two other area hospitals (Cass County Memorial Hospital of Atlantic and Myrtue Medical Center of Harlan) to form a 28E organization, Health Partners of Southwest Iowa (HPSI). The organization was formed to share ideas, capital, and resources and to assist in the containment of healthcare costs, while improving the quality of healthcare being delivered in the member hospital service areas. Each of the three members purchase mobile scanning and other medical services from the organization.

Below is a summary of the Hospital's transactions with HPSI and year end balances involving the 28E organization:

	2013	2012
Services purchased from HPSI	\$ 79,397	\$ 80,954
Services and supplies provided to HPSI	\$ 26,572	\$ 27,679
Amount due to HPSI	\$ 19,902	<u>\$ 16,574</u>
Member share of net position	<u>\$ 452,158</u>	<u>\$ 427,814</u>

The member share of net position is included in other assets and the amount due to HPSI is included in accounts payable on the balance sheet. The Hospital has no ongoing financial interest in or responsibility to HPSI, other than that disclosed above. Financial statements of HPSI are on file at the Hospital and the office of the State Auditor.

Montgomery County Memorial Hospital Foundation

Montgomery County Memorial Hospital Foundation is a separate not for profit organization with an independent board of directors. The Hospital is the sole beneficiary of the Foundation, therefore the Foundation is considered to be a component unit of the Hospital (see Note A.1). During the year ended June 30, 2013, contributions received from this organization were \$ - 0 - (\$30,355 for 2012).

### MONTGOMERY COUNTY MEMORIAL HOSPITAL

Notes to Financial Statements June 30, 2013 and 2012

#### NOTE K - OTHER POST EMPLOYMENT BENEFITS (OPEB)

Plan Description: As required by state law, the Hospital offers health insurance to former employees who have retired after age 55, but have not reached Medicare eligibility. The self-insured plan is a part of the plan offered to all Hospital employees, and the retirees must pay the full cost of the health insurance premium equal to that charged for current employees. There are approximately 205 active employees and 2 retirees currently covered by the plan.

Funding Policy: The Hospital does not set aside funds to pay for any OPEB liability. Any Hospital costs of an implicit health insurance premium rate subsidy are charged to expense in the year paid.

Net OPEB Obligation: Management had an actuarial valuation performed dated October 30, 2013. The actuarial report noted the unfunded actuarial accrued liability to be \$291,629. The annual required contribution for the year end June 30, 2013 is \$34,888. The actuarial accrued liability is assuming a 35% participation rate; however, the Hospital's current participation rate is less than one percent. Because of the high assumed participation rate, management considers the actuarial accrued liability to be overstated. Management considers the liability to be immaterial and has not recorded this liability in its statements of net position.

#### NOTE L - COMMITMENTS AND CONTINGENCIES

#### Notes Receivable

The notes receivable represent funds advanced under agreements with physicians who have begun to practice in the community. The agreements include commitments by the physicians to provide medical services in the community for a specified period of years. In exchange for the commitments of time and services, the Hospital will forgive the notes over the terms of the commitments.

#### Risk Management

The Hospital is insured by a claims-made policy for protection against liability claims resulting from professional services provided or which should have been provided. Management believes that the malpractice insurance coverage is adequate to cover all asserted and any unasserted claims, therefore no related liability has been accrued. Montgomery County Memorial Hospital is exposed to various other common business risks for which it is covered by commercial insurance. Settled claims from these risks have not exceeded insurance coverage during the past three years.

#### Construction in Progress

As of June 30, 2013, the Hospital incurred costs of \$187,976 for the purchase of equipment and various computer hardware and software applications that have not been placed in service. The total estimated cost of this health information technology project is approximately \$947,000. The project is being financed through the use of internally generated funds.

#### Subsequent Event

The Hospital has evaluated all subsequent events through December 11, 2013, the date the financial statements were available to be issued.

## NOTE M - ACCOUNTS RECEIVABLE AND CONCENTRATION OF CREDIT RISK

The Hospital grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors at June 30, 2013 and 2012, was as follows:

		2013	 2012
Receivable from:			
Patients	\$	962,129	\$ 898,755
Medicare		3,609,388	3,000,041
Medicaid		398,087	293,283
Blue Cross		1,435,831	1,178,043
Other commercial insurance carriers		537,507	759,669
Others		76,875	33,549
Less allowances for doubtful accounts and		7,019,817	6,163,340
contractual adjustments		2,202,000	 1,519,000
	<u>\$</u>	4,817,817	\$ 4,644,340

#### NOTE N - ACCOUNTING CHANGE

During 2013, the Hospital elected to early implement GASB Statement No. 65 "Items Previously Reported as Assets and Liabilities." For the year ended June 30, 2012, the Hospital had unamortized debt issue cost from prior periods of \$131,868. The Hospital recorded the costs as an asset to be amortized over the life of the loan. Under provisions of GASB Statement No. 65, debt issue costs are to be expensed in the year incurred. The change will be made by reducing net position as of the beginning of the 2011-12 year and expenses for the 2011-12 year. The following is a summary of the effect of the change on the individual items in the financial statements for the year ended June 30:

	2012					
	Previous	Change	Current			
Revenues	\$ 26,890,316	\$	\$ 26,890,316			
Expenses	27,521,303	( 27,907)	27,493,396			
Operating Income (Loss)	( 630,987)	27,907	( 603,080)			
Non-Operating Revenue	1,337,085		1,337,085			
Capital Grants and Contributions	93,116		93,116			
Excess of Revenues Over Expenses and Increase in Net Position	799,214	27,907	827,121			
Net Position Beginning of Year	23,694,570	( 131,868)	23,562,702			
Net Position End of Year	<u>\$ 24,493,784</u>	<u>\$(103,961</u> )	<u>\$ 24,389,823</u>			

\* \* \*



#### MONTGOMERY COUNTY MEMORIAL HOSPITAL Budgetary Comparison Schedule Year ended June 30, 2013

This budgetary comparison is presented as Required Supplementary Information in accordance with Government Auditing Standards. In accordance with the Code of Iowa, the Board of Trustees annually adopts a budget following the required public notice and hearings. The annual budget may be amended during the year utilizing similar statutorily-prescribed procedures. The following is a reconciliation between reported amounts and the modified accrual basis used to prepare the budget. The adjustment results from accounting for depreciation, interest, plant and equipment purchases, debt payments, and net assets differently for financial statement and budget purposes.

		Per Financial Statements						
		Unrestricted Fund	Total					
Amount raised by taxation		\$ 1,532,004	\$	\$ 1,532,004				
Other revenues Transfers in (out)		27,395,714 31,000	31,118 ( 31,000)					
		28,958,718	118	28,958,836				
Expenses		28,375,746		28,375,746				
Net		582,972	118	583,090				
Balance beginning of year		24,318,480	71,343	24,389,823				
Balance end of year		<u>\$ 24,901,452</u>	\$ 71,461	<u>\$ 24,972,913</u>				
	Total Per Financial Statements	Budget Adjustments	Budget Basis	Adopted Budget				
Amount raised by taxation	\$ 1,532,004	\$	\$ 1,532,004	\$ 1,468,622				
Other revenues	<u>27,426,832</u> 28,958,836	448,654 448,654	<u>27,875,486</u> 29,407,490	<u>32,423,088</u> 33,891,710				
Expenses	28,375,746	113,802	28,489,548	33,690,029				
Net	583,090	334,852	917,942	201,681				
Balance beginning of year	24,389,823	( 16,095,539)	8,294,284	8,294,284				
Balance end of year	<u>\$ 24,972,913</u>	<u>\$(_15,760,687)</u>	\$ 9,212,226	<u>\$ 8,495,965</u>				

See Independent Auditor's Report.

## SUPPLEMENTARY INFORMATION

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Patient Receivables June 30,

## Analysis of Aging:

		2013	3		2012	2
Days Since Discharge		Amount	Percent to Total		Amount	Percent to Total
0 - 30 31 - 90 91 - 180 181 - 360 361 and over In hospital and unbilled	\$ 	2,406,650 2,195,538 455,496 221,502 124,527 5,403,713 1,616,104 7,019,817	34.3% 31.3 6.5 3.1 1.8 77.0 23.0 100.0%	\$	1,691,422 1,855,878 399,268 172,917 121,199 4,240,684 1,922,656 6,163,340	$ \begin{array}{r} 27.4\% \\ 30.1 \\ 6.5 \\ 2.8 \\ \underline{2.0} \\ 68.8 \\ \underline{31.2} \\ \underline{100.0\%} \end{array} $
Less: Allowance for doubtful accounts Allowance for contractual adjustments	<u> </u>	365,000 1,837,000 4,817,817		<u>\$</u>	321,000 1,198,000 4,644,340	

## Allowance for Doubtful Accounts:

	<u>Year Ende</u> 2013	ed June 30, 2012
Balance, beginning	\$ 321,000	\$ 319,447
Provision for bad debts	1,097,528	885,561
Recoveries of accounts previously written off	254,430 1,672,958	353,696 1,558,704
Accounts written off	1,307,958	1,237,704
Balance, ending	<u>\$ 365,000</u>	<u>\$ 321,000</u>

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Inventory/Prepaid Expense June 30,

	2013	2012
Inventory General stores Pharmacy Dietary Operating room	\$ 89,208 186,541 18,089 87,062	\$ 96,194 196,608 15,282 88,403
	\$ 380,900	\$ 396,487
Prepaid Expense Dues Insurance Service contracts	\$ 15,519 240,923 43,491	\$ 14,698 72,938 81,337
	\$ 299,933	\$ 168,973

### MONTGOMERY COUNTY MEMORIAL HOSPITAL Patient Service Revenue Year ended June 30,

		2013			
	Inpatient	Outpatient			
Daily Patient Services:					
Medical, surgical and obstetric	\$ 1,076,956	\$ 235,238			
Coronary care	1,704,088				
Nursery	86,111				
	2,867,155	477,324			
0.1 31 ' 6 '					
Other Nursing Services:					
Operating room	368,049				
Recovery room	8,986				
Labor and delivery rooms	72,887				
Medical supplies	558,629				
Intravenous therapy	1,717,464				
Emergency service	1,447	1,903,984			
Wound/ostomy care	503				
Outpatient clinics	451	330,427			
	2,728,416	7,473,578			
0.1 7 0 1 1 7		,			
Other Professional Services:					
Emergency room physicians	169	j j			
Laboratory	644,813				
Electrocardiology	101,923				
Electroencephalography	5,294	18,338			
Radiology	151,295	1,732,615			
Ultrasound	84,901	834,443			
CT scan	190,250				
Mammography		456,867			
MRI	69,605				
Nuclear medicine	42,870				
Pharmacy	1,539,215				
Anesthesiology	127,193	655,216			
Inhalation therapy	927,183	344,994			
Physical therapy	111,885	905,347			
Speech therapy	5,938	26,056			
Occupational therapy	7,588	179,393			
Cardiopulmonary rehabilitation		90,147			
Oncology	16,134	1,191,688			
Sleep study		202,771			
Home health		322,952			
Hospice		455,612			
Business health		133,331			
Women's Health Clinic		375,528			
Villisca Medical Clinic		249,273			
Surgical services	<del></del>	1,092,566			
Internal Medicine Clinic		1,880,847			
	4,026,256	<u>1,880,847</u> 21,653,870			
		<u></u>			
	<u>\$ 9,621,827</u>	\$ 29,604,772			

See Independent Auditor's Report.

	20	13			2012
S	Swing Bed		Total		Total
\$	1,240,141	\$	2,552,335	\$	3,009,160
			1,946,174		1,860,837
			86,111		101,305
	1,240,141		4,584,620		4,971,302
					, ,
	15,398		3,424,769		1,837,488
	240		171,652		167,148
			110,393		126,363
	195,255		2,052,683		2,073,340
	517,765		2,900,620		3,384,794
			1,905,431		1,807,179
	465		34,691		22,854
	309		331,187		291,909
	729,432		10,931,426		9,711,075
	,		, ,		-,1,0.0
			1,001,831		1,008,273
	191,307		3,529,781		3,346,249
	6,126		457,228		400,250
			23,632		20,376
	42,249		1,926,159		1,773,043
	11,372		930,716		850,750
	32,370		3,277,785		3,191,968
			456,867		398,236
	7,055		1,288,820		1,206,770
	6,702		346,333		214,336
	932,321		4,368,834		4,242,554
	1,403		783,812		787,592
	479,960		1,752,137		2,000,314
	249,710		1,266,942		1,378,544
	6,313		38,307		80,709
	39,103		226,084		238,926
			90,147		120,210
	7,288		1,215,110		1,719,782
			202,771		199,534
			322,952		458,912
			455,612		355,057
			133,331		116,221
			375,528		443,853
			249,273		189,291
		•	1,092,566		982,189
			1,880,847		1,985,801
	2,013,279		27,693,405		<u>27,709,740</u>
			,,,0,0,100		<u>~1,107,170</u>
\$	3,982,852	\$	43,209,451	\$	42,392,117
		<u>~</u>		<u>~</u>	. <u> </u>

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Revenue and Related Adjustments Year ended June 30,

	2013	2012
Net Patient Service Revenue: Patient service revenue Contractual adjustments Discounts and allowances Charity care Provision for bad debts	\$ 43,209,451 ( 14,784,647) ( 151,912) ( 45,606) ( 1,097,528)	\$ 42,392,117 ( 14,643,838) ( 120,467) ( 241,080) ( 885,561)
	<u>\$ 27,129,758</u>	<u>\$ 26,501,171</u>
Other Operating Revenue:    Meals sold    Prisoner meals    Meals on wheels    Lifeline    Medical record transcripts    Case management    Wellness    Contracted services    Certified training classes    Miscellaneous	\$ 96,146 43,712 26,880 68,547 1,439 37,566 31,694 30,775	\$ 94,685 29,451 34,347 63,886 1,825 45,049 29,000 24,490 2,960 63,452
	\$ 392,062	\$389,145

#### MONTGOMERY COUNTY MEMORIAL HOSPITAL Nursing Service Expenses Year ended June 30,

	2013	2012
Administrative: Salaries and wages Employee benefits Supplies and other expense	\$ 166,783 47,904 8,003 222,690	\$ 161,690 46,901 8,647 217,238
Quality Assurance: Salaries and wages Employee benefits Supplies and other expense	69,764 22,415 9,788 101,967	65,174 15,439 9,200 89,813
Inservice: Salaries and wages Employee benefits Supplies and other expense	64,480 31,958 66,065 162,503	60,770 29,664 31,637 122,071
Medical and Surgical: Salaries and wages Employee benefits Supplies and other expense	1,681,199 632,692 120,780 2,434,671	1,660,444 565,317 155,977 2,381,738
Coronary Care: Salaries and wages Employee benefits Supplies and other expense	990,042 344,504 43,446 1,377,992	920,088 308,577 39,321 1,267,986
Obstetric: Salaries and wages Employee benefits Supplies and other expense	25,845 4,210 39,500 69,555	31,217 4,822 17,185 53,224

	2013	2012
Nursery: Salaries and wages Employee benefits Supplies and other expense	\$ 30,123 4,909 2,750 37,782	\$ 37,470 5,800 2,938 46,208
Operating Room: Salaries and wages Employee benefits Supplies and other expense	416,269 169,135 591,432 1,176,836	406,302 149,790 171,229 727,321
Labor and Delivery: Salaries and wages Employee benefits Supplies and other expense	14,421 2,348 1,090 17,859	17,323 2,676 608 20,607
Central Services and Supply: Salaries and wages Employee benefits Supplies sold to patients Supplies and other expense	176,418 82,698 133,894 9,706 402,716	186,469 85,229 494,107 <u>9,217</u> 775,022
Intravenous Therapy: Solutions	26,940	33,525
Emergency Services: Salaries and wages Employee benefits Supplies and other expense	551,481 116,633 47,215 715,329	536,011 113,019 45,313 694,343
Outpatient Clinics: Salaries and wages Employee benefits Supplies and other expense	298,393 120,389 43,090 461,872 \$ 7,208,712	271,865 100,280 38,042 410,187 \$ 6,839,283

		<del></del>	2013		2012
	<b>SUMMARY</b>				
Salaries and wages Employee benefits Other expense		\$	4,485,218 1,579,795 1,143,699	\$	4,354,823 1,427,514 1,056,946
		<u>\$</u>	7,208,712	<u>\$</u>	6,839,283

		2013		2012
Emergency Room Physicians: Professional fees	\$	1,039,716	\$	1,009,326
Laboratory: Salaries and wages Employee benefits Purchased services Supplies and other expense		544,691 163,917 201,771 469,050 1,379,429		522,431 149,787 99,697 544,921 1,316,836
Blood Bank: Cost of blood		139,410		153,774
Electrocardiology: Salaries and wages Employee benefits Purchased services		16,155 2,621 <u>98,226</u> 117,002	_	17,991 2,781 <u>93,616</u> 114,388
Electroencephalography: Salaries and wages Employee benefits		570 93 663		868 135 1,003
Radiology: Salaries and wages Employee benefits Supplies and other expense		492,770 168,085 388,033 1,048,888		480,222 153,170 112,493 745,885
Ultrasound: Salaries and wages Employee benefits Supplies and other expense	_	97,137 16,077 48,846 162,060		95,500 22,054 49,545 167,099

	2013	2012
CT Scan: Supplies and other expense	\$ 113,40	51 \$ 229,491
Mammography:		
Purchased services	69,09	98 97,740
Supplies and other expense	32,90	<u>19,369</u>
	102,00	67 117,109
MRI:		•
Purchased services	132,50	00 151,500
Supplies and other expense	9,08	<u>6,825</u>
	141,58	89 158,325
Nuclear Medicine:		
Purchased services	54,33	35 40,895
Supplies and other expense	2,2;	29
	56,50	64 40,895
Pharmacy:		
Salaries and wages	326,10	308,663
Employee benefits	71,89	
Purchased services	96,38	88 85,470
Drugs	523,19	
Supplies and other expense	12,52	$\frac{25}{200}$ $\frac{22,271}{100000000000000000000000000000000000$
	1,030,10	00 1,082,945
Anesthesiology:		
Salaries and wages	395,74	46 419,873
Employee benefits	77,82	
Professional fees		1,678
Supplies and other expense	33,85	58 <u>41,160</u>
	507,6	73 541,657
Inhalation Therapy:		
Salaries and wages	342,93	
Employee benefits	110,69	
Professional fees	48,4	
Supplies and other expense	<u>53,83</u> 555,90	
	333,31	J4 J14,499

		2013		2012
Physical Therapy: Professional fees Supplies and other expense	\$	482,495 18,005 500,500	\$	523,165 12,970 536,135
Speech Therapy: Professional fees		33,270		58,095
Occupational Therapy: Professional fees		91,937		95,464
Cardiopulmonary Rehabilitation: Salaries and wages Employee benefits Supplies and other expense		100,761 29,765 5,352 135,878		104,583 30,226 5,554 140,363
Oncology: Salaries and wages Employee benefits Supplies and other expense		170,696 40,802 476,077 687,575		162,741 38,137 509,898 710,776
Sleep Study: Salaries and wages Employee benefits Supplies and other expense	<del></del>	56,621 9,713 9,503 75,837	_	54,943 10,514 14,695 80,152
Home Health: Salaries and wages Employee benefits Professional fees Purchased services Supplies and other expense		229,716 96,241 35,527 18,910 26,409 406,803		276,709 91,306 76,490 21,064 31,195 496,764

	2013	2012	
Hospice: Salaries and wages Employee benefits Purchased services Supplies and other expense	\$ 114,356 23,619 62,042 50,025 250,042	\$ 65,158 14,778 71,473 45,081 196,490	
Business Health: Salaries and wages Employee benefits Supplies and other expense	37,657 11,278 16,634 65,569	36,292 10,416 16,160 62,868	
Women's Health Clinic: Salaries and wages Employee benefits Supplies and other expense	345,879 96,949 33,150 475,978	332,146 97,148 47,941 477,235	
Villisca Medical Clinic: Salaries and wages Employee benefits Supplies and other expense	169,797 60,049 64,921 294,767	164,424 50,269 63,887 278,580	
Surgical Services: Salaries and wages Employee benefits Supplies and other expense	396,385 57,671 <u>36,346</u> 490,402	382,561 53,100 37,246 472,907	
Internal Medicine Clinic: Salaries and wages Employee benefits Purchased services Supplies and other expense	943,271 258,048 37,871 79,254 1,318,444	918,820 237,253 46,485 75,320 1,277,878	
Social Services: Salaries and wages Employee benefits Supplies and other expense	108,043 29,305 1,679 139,027	103,212 26,946 2,152 132,310	

		2013		2012	
Lifeline: Supplies and other expense		\$	59,211	\$	57,056
Health Information Management: Salaries and wages Employee benefits Supplies and other expense		<del></del>	322,441 107,898 54,313 484,652		318,793 97,767 48,897 465,457
Case Management: Salaries and wages Employee benefits Supplies and other expense			1,735 3,814 3,333 8,882		1,411 147 7,340 8,898
Diabetes Program: Salaries and wages Employee benefits Supplies and other expense			76,536 25,888 2,997 105,421		74,520 24,017 4,594 103,131
Wound/Ostomy Care: Purchased services Supplies and other expense		<u> </u>	15,714 1,244 16,958 2,035,677	<u> </u>	   11,841,591
	SUMMARY				
Salaries and wages Employee benefits Professional fees Other expense		\$	5,289,981 1,462,254 1,731,638 3,551,804	\$	5,196,346 1,360,097 1,764,768 3,520,380
		<u>\$ 1</u>	<u>2,035,677</u>	<u>\$</u>	<u>11,841,591</u>

#### MONTGOMERY COUNTY MEMORIAL HOSPITAL General Service Expenses Year ended June 30,

		2013		2012	
Dietary: Salaries and wages Employee benefits Food Supplies and other expense		\$	463,707 188,395 222,183 55,992 930,277	\$	451,234 182,038 214,866 46,609 894,747
Housekeeping: Salaries and wages Employee benefits Purchased services Supplies and other expense		-	432,231 205,096 20,818 101,859 760,004		407,158 195,024 23,872 105,844 731,898
Laundry and Linen: Purchased services Supplies and other expense			100,099 2,667 102,766		110,214 3,419 113,633
Plant Engineering: Salaries and wages Employee benefits Utilities Purchased services Supplies and other expense		<u> </u>	206,967 54,500 413,394 39,132 201,251 915,244 2,708,291	<u> </u>	199,905 47,934 386,628 37,800 168,919 841,186
	SUMMARY				
Salaries and wages Employee benefits Other expense		\$	1,102,905 447,991 1,157,395	\$	1,058,297 424,996 1,098,171
		<u>\$</u>	<u>2,708,291</u>	\$	<u>2,581,464</u>

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Fiscal and Administrative Service Expenses Year ended June 30,

	2013		2012	
Administrative: Salaries and wages Employee benefits Professional fees Dues and subscriptions Purchased services Collection fees Telephone Supplies and other expense	\$	270,789 243,654 43,619 93,720 29,564 54,818 29,619 101,280 867,063	\$	264,564 227,080 59,745 34,894 25,145 53,829 30,292 141,567 837,116
Accounting: Salaries and wages Employee benefits Supplies and other expense		216,756 64,534 21,725 303,015		210,605 57,539 20,854 288,998
Admissions/Business Office: Salaries and wages Employee benefits Supplies and other expense		222,627 79,613 <u>27,283</u> 329,523		229,436 75,166 27,955 332,557
Patient Accounting: Salaries and wages Employee benefits Supplies and other expense		284,643 100,206 48,332 433,181		243,376 88,460 49,802 381,638
Fiscal Services: Salaries and wages Employee benefits Purchased services Supplies and other expense		135,077 62,048 2,224 5,183 204,532	<del></del>	128,951 66,769 2,293 4,598 202,611
Information Systems: Salaries and wages Employee benefits Purchased services and maintenance Supplies and other expense		739,303 197,928 455,514 63,485 1,456,230	_	738,042 204,091 337,209 71,233 1,350,575

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Fiscal and Administrative Service Expenses - Continued Year ended June 30,

	2013	2012
Human Resources: Salaries and wages Employee benefits Purchased services Supplies and other expense	\$ 87,287 46,649 3,916 44,531 182,383	\$ 81,970 41,942 4,312 25,062 153,286
Public Relations: Salaries and wages Employee benefits Supplies and other expense	80,212 22,050 120,549 222,811	78,910 16,886 97,660 193,456
DRG/Utilization Review: Salaries and wages Employee benefits Supplies and other expense	106,340 28,279 473 135,092	101,756 27,183 1,655 130,594
Insurance: Liability and property insurance	140,590 \$ 4,274,420	141,021 \$ 4,011,852
SUMMARY		
Salaries and wages Employee benefits Professional fees Other expense	\$ 2,143,034 844,961 43,619 1,242,806 \$ 4,274,420	\$ 2,077,610 805,116 59,745 1,069,381 \$ 4,011,852
SUMMARY OF EXPENSE	ES.	
Salaries and wages Employee benefits Professional fees Other expense	\$ 13,021,138 4,335,001 1,775,257 7,095,704 \$ 26,227,100	\$ 12,687,076 4,017,723 1,824,513 6,744,878 \$ 25,274,190

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Comparative Statistics Year ended June 30,

	2013	2012	_2011_	_2010_	_2009_
Admissions	767	798	825	906	1,099
Discharges	759	<b>7</b> 97	825	915	1,096
Average Length of Stay	3.77	3.70	3.54	3.70	3.63
Acute Patient Days	2,861	2,947	2,919	3,387	3,982
Average Occupied Beds	7.8	8.1	8.0	9.3	10.9
Swing Bed Days	2,141	2,755	2,716	2,750	2,290
Combined Average Occupied Beds	13.7	15.6	15.4	16.8	17.2
Beds Available	25	25	25	25	25
Nursery Days	123	150	126	158	190
Outpatient Occasions of Service	37,890	39,031	40,682	40,328	42,096

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Comparative Statements of Net Position June 30,

	2013	2012
Current Assets: Cash Receivables, net Inventory Prepaid expense Estimated third-party payor settlements Succeeding year property tax receivable Internally designated assets Total current assets	\$ 677,678 4,885,015 380,900 299,933 953,000 1,525,000 88,201 8,809,727	4,706,719 396,487 168,973  1,469,000 92,406
Other Assets: Internally designated and restricted assets Capital assets, net Other non-current assets Total other assets	7,248,921 19,985,689 540,107 27,774,717 \$ 36,584,444	21,455,529 2 518,817 2 28,377,891
Current Liabilities: Current maturities of long-term debt Accounts payable Estimated third-party payor settlements Accrued expenses Deferred revenue for succeeding year property tax receivable Total current liabilities	\$ 462,404 756,426  1,697,225  1,525,000 4,441,055	1,167,688 207,000 1,568,097 2 1,469,000
Long-Term Debt, Net	7,170,476	7,632,880
Net Position	24,972,913	24,389,823
	\$ 36,584,444	\$ 36,869,097

	2011	2010	2009
\$	1,890,890	\$ 584,377	\$ 1,138,063
	3,597,681	4,670,816	4,102,927
	413,594	397,955	387,787
	430,890	419,605	127,948
	938,000	554,000	
	1,395,000	1,364,000	1,282,000
	91,989	847,260	1,003,162
	8,758,044	8,838,013	8,041,887
	5,484,053	3,638,107	6,430,070
	21,924,713	20,655,089	13,595,321
	482,575	468,312	678,058
	27,891,341	24,761,508	20,703,449
			20,703,115
\$	36,649,385	\$ 33,599,521	\$ 28,745,336
\$	430,524	\$ 727,444	\$ 497,340
	1,670,469	1,508,912	673,622
			35,000
	1,416,584	1,325,410	1,265,831
	1,395,000	1,364,000	1 292 000
	4,912,577	4,925,766	1,282,000 3,753,793
	1,512,577	4,723,700	3,733,793
	8,174,106	4,589,123	1,653,893
	23,562,702	24,084,632	23,337,650
<u>\$</u>	36,649,385	\$ 33,599,521	\$ 28,745,336

# MONTGOMERY COUNTY MEMORIAL HOSPITAL Comparative Statements of Revenues and Expenses Year ended June 30,

	2013	2012
Patient Service Revenue	\$ 43,209,451	\$ 42,392,117
Adjustments to Patient Service Revenue	( 16,079,693)	(15,890,946)
Net Patient Service Revenue	27,129,758	26,501,171
Other Revenue	392,062	389,145
Total Revenue	27,521,820	26,890,316
Expenses	28,375,746	27,493,396
Operating Loss	( 853,926)	( 603,080)
Non-Operating Revenue, Net	<u>1,406,016</u>	1,337,085
Excess of Revenues Over Expenses (Expenses		
Over Revenues) Before Capital Grants and Contributions	552,090	734,005
Capital Grants and Contributions	31,000	93,116
Increase (Decrease) in Net Position	<u>\$ 583,090</u>	<u>\$ 827,121</u>

2011	2010	2009
\$ 40,741,153	\$ 37,807,125	\$ 36,707,743
( 15,346,995)	( 13,158,375)	( 13,097,499)
25,394,158	24,648,750	23,610,244
335,312	388,907	415,627
25,729,470	25,037,657	24,025,871
27,552,077	25,645,860	24,828,811
( 1,822,607)	( 608,203)	( 802,940)
1,255,677	1,290,790	1,603,965
( 566,930)	682,587	801,025
45,000	64,395	25,000
<u>\$( 521,930</u> )	\$ 746,982	<u>\$ 826,025</u>



### Gronewold, Bell, Kyhnn & Co. P.C.

CERTIFIED PUBLIC ACCOUNTANTS • BUSINESS AND FINANCIAL CONSULTANTS

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Mark D. Kyhnn David L. Hannasch Kenneth P. Tegels Christopher J. Nelson David A. Ginther

Independent Auditor's Report on Internal Control over Financial Reporting
and on Compliance and Other Matters

Based on an Audit of Financial Statements Performed in Accordance with
Government Auditing Standards

To the Board of Trustees Montgomery County Memorial Hospital Red Oak, Iowa

We have audited the financial statements of Montgomery County Memorial Hospital as of and for the year ended June 30, 2013, and have issued our report thereon dated December 11, 2013. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States.

#### **Internal Control Over Financial Reporting**

In planning and performing our audit, we considered Montgomery County Memorial Hospital's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing our opinion on the effectiveness of Montgomery County Memorial Hospital's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Hospital's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the preceding paragraph and would not necessarily identify all deficiencies in internal control over financial reporting that might be significant deficiencies or material weaknesses, and, therefore, there can be no assurance all deficiencies, significant deficiencies, or material weaknesses have been identified. However, as described in the accompanying Schedule of Findings, we identified certain deficiencies in internal control over financial reporting that we consider to be significant deficiencies.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility a material misstatement of the Hospital's financial statements will not be prevented or detected and corrected on a timely basis.

To the Board of Trustees Montgomery County Memorial Hospital

A significant deficiency is a deficiency or combination of deficiencies in internal control which is less severe than a material weakness, yet important enough to merit attention by those charged with governance. We consider the deficiency described in Part I of the accompanying Schedule of Findings as item 13-I-A to be a significant deficiency.

#### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Montgomery County Memorial Hospital's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of non-compliance or other matters that are required to be reported under Government Auditing Standards.

Comments involving statutory and other legal matters about the Hospital's operations for the year ended June 30, 2013 are based exclusively on knowledge obtained from procedures performed during our audit of the financial statements of the Hospital. Since our audit was based on tests and samples, not all transactions that might have had an impact on the comments were necessarily audited. The comments involving statutory and other legal matters are not intended to constitute legal interpretations of those statutes.

#### **Response to Findings**

Montgomery County Memorial Hospital's response to the findings identified in our audit is described in the accompanying Schedule of Findings. While we have expressed our conclusion on the Hospital's response, we did not audit the Hospital's response and, accordingly, we express no opinion on it.

#### **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the result of that testing and not to provide an opinion on the effectiveness of the Hospital's internal control over compliance. This report is an integral part of an audit performed in accordance with <u>Government Auditing Standards</u> in considering the Hospital's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Smewall, Den, Kyhnnzla, P. C. Atlantic, Iowa

December 11, 2013

#### MONTGOMERY COUNTY MEMORIAL HOSPITAL Schedule of Findings Year ended June 30, 2013

#### PART I - FINDINGS RELATED TO THE FINANCIAL STATEMENTS

#### Significant Deficiencies:

13-I-A Segregation of Duties: A limited number of people have the primary responsibility for most of the accounting and financial duties. As a result, some of those aspects of internal accounting control which rely upon an adequate segregation of duties are, for all practical purposes, missing in the Hospital. This is a common deficiency among most small rural Hospitals.

<u>Recommendation</u>: We recognize that it may not be economically feasible for the Hospital to employ additional personnel for the sole purpose of segregating duties, however, it is our professional responsibility to bring this control deficiency to your attention. We recommend that the Board be aware of the lack of segregation of duties and that they act as an oversight group to the accounting personnel.

<u>Response</u>: The Board is aware of this lack of segregation of duties, but it is not economically feasible for the Hospital to employ additional personnel for this reason. The Board will continue to act as an oversight group.

Conclusion: Response accepted.

\* \* \*

#### MONTGOMERY COUNTY MEMORIAL HOSPITAL Schedule of Findings Year ended June 30, 2013

#### PART II - OTHER FINDINGS RELATED TO REQUIRED STATUTORY REPORTING

- 13-II-A Certified Budget: Hospital expenditures during the year ended June 30, 2013 did not exceed amounts budgeted.
- <u>13-II-B Questionable Expenditures</u>: During the audit, we noted no expenditures for parties, banquets or other entertainment for employees or Board members.
- <u>13-II-C Travel Expense</u>: No expenditures of Hospital money for travel expenses of spouses of Hospital officials and/or employees were noted.
- <u>13-II-D Business Transactions</u>: During our audit, we noted no business transactions between the Hospital and Hospital officials.
- 13-II-E Board Minutes: No transactions were found that we believe should have been approved in the Board minutes but were not.
- <u>13-II-F Deposits and Investments</u>: We noted no instances of non-compliance with the deposit and investment provisions of Chapter 12B and Chapter 12C of the Code of Iowa and the Hospital's investment policy.

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